

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re application of: David M. Brooks

Serial No.: 08/147,941 Group No.: 2107

Filed: November 5, 1993 Examiner: D. Martin

For: ADJUSTABLE CHAIR HAVING PROGRAMMABLE CONTROL
SWITCHES

Commissioner of Patents and Trademarks
Washington, D.C. 20231

AMENDMENT TRANSMITTAL

RECEIVED
OCT 05 1994
GROUP 214

1. Transmitted herewith is an amendment for this application.

STATUS

1. Applicant is:

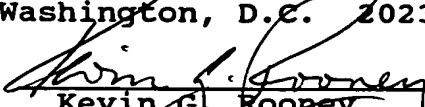
XXX a small entity

___ other than a small entity

Certificate of Mailing (37 CFR 1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Date 9/26/94


Kevin G. Rooney
Reg. No. 36,330

EXTENSION OF TIME

1. Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

<u>Extension</u>	<u>Other than a Small Entity</u>	<u>Small Entity</u>
<u> </u> one month	\$ 110.00	\$ 55.00
<u> </u> two months	\$ 370.00	\$185.00
<u> </u> three months	\$ 870.00	\$435.00
<u> </u> four months	\$1360.00	\$680.00

Fee: \$

2. XXX Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

1. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

Col. 1	Col. 2	Col. 3	Small Entity	Other
Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	Rate Add Fee	Rate Add Fee
Total 49	- 48	= 1	x11= 11	x22=
Indep 8	- 8	= 0	x38=	x76=
<u> </u> Multiple Dependent Claim			+120=	+240=
Total:			\$ 11.00	\$

2. No additional fee for claims is required.

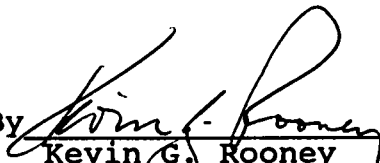
FEE PAYMENT

1. Attached is a check in the sum of _____.
2. Please Charge Deposit Account No. 23-3000 the sum of \$11.00.

FEE DEFICIENCY

1. If any additional extension and/or fee is required, charge Deposit Account No. 23-3000.
2. If any additional fee for claims is required, charge Deposit Account No. 23-3000.

Also Enclosed:

By 
Kevin G. Rooney
Reg. No. 36,330

WOOD, HERRON & EVANS
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Cincinnati, Ohio 45202
(513) 241-2324